

# Certified Position Application

Crowley County School District  
117 W. Third Ave.  
Ordway, CO 81063  
Phone (719) 267-3117  
Fax (719) 267-3130

Crowley County School District does not discriminate against any applicant for employment on the basis of age, race/color, religion/creed, gender, national/ethnic origin, handicap/disability, or citizenship status.

**Position Applying For:** \_\_\_\_\_

**INSTRUCTIONS:** Complete (please type or print) all sections accurately.

## PERSONAL DATA

Name: \_\_\_\_\_  
Last First Middle Former/Maiden

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number(s): Home: \_\_\_\_\_ Work: \_\_\_\_\_

Current job/employment: \_\_\_\_\_ Current Salary: \_\_\_\_\_

**If offered, Date available to begin employment:** \_\_\_\_\_

List any special skills or training that you have relating to the classified position for which you are applying:

\_\_\_\_\_  
\_\_\_\_\_

Have you ever worked for this school District in the past? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes: What Position: \_\_\_\_\_ When: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

\_\_\_\_\_

**BACKGROUND**

Each of the following questions must be answered with a "Yes" or "No". If any answer is "Yes", please attach an explanation, include final disposition of investigation. (Note: A "Yes" answer will not necessarily bar you from employment. Each situation will be judged with respect to time, circumstances, and seriousness.)

- Have you ever resigned or been discharged from any position, including the armed forces, while under suspicion of having engaged in criminal, immoral, or unprofessional conduct, or are you under investigation for any such charge? \_\_\_\_ Yes \_\_\_\_ No
- Have you been convicted of a felony or misdemeanor, including pleading *nolo contendere*, or are you under investigation for any such offense, other than a minor traffic offense? **Please note: Driving While Intoxicated (DWI), Driving Under The Influence (DUI), and similar charges are NOT considered minor traffic offenses** \_\_\_\_ Yes \_\_\_\_ No
- Have you ever surrendered a certificate, credentials, license, permit or have one denied revoked or suspended in lieu of dismissal? \_\_\_\_ Yes \_\_\_\_ No
- Have you ever received an unsatisfactory performance evaluation? \_\_\_\_ Yes \_\_\_\_ No
- Have you ever received probation or deferred judgment? \_\_\_\_ Yes \_\_\_\_ No
- Have you ever served time in prison? \_\_\_\_ Yes \_\_\_\_ No
- Have you ever been convicted, resigned, discharged from any position in which the subject of the investigation involved criminal, immoral, or unprofessional conduct with/involving children in which you were in a position of trust. \_\_\_\_ Yes \_\_\_\_ No

I am aware that if offered a position a background check will be made on behalf of the school district: \_\_\_\_\_

**EDUCATION:** Proof of education level may be required prior to employment.

Type	Name and Address	Number of Years Completed	Diploma, Certificates, etc.
High School/GED			
College			
Other			
Other			

**FORMER EMPLOYERS** (Complete full information on last four employers, **starting with the last employer first**)

Employer Information		Supervisor Information		Employment Dates	
Employer Name		Name		From	
Address		Phone #		To	
City, State, Zip		Reason for Leaving			
Phone number		Position Duties			
Employer Information		Supervisor Information		Employment Dates	
Employer Name		Name		From	
Address		Phone #		To	
City, State, Zip		Reason for Leaving			
Phone number		Position Duties			
Employer Information		Supervisor Information		Employment Dates	
Employer Name		Name		From	
Address		Phone #		To	
City, State, Zip		Reason for Leaving			
Phone number		Position Duties			
Employer Information		Supervisor Information		Employment Dates	
Employer Name		Name		From	
Address		Phone #		To	
City, State, Zip		Reason for Leaving			
Phone number		Position Duties			
Employer Information		Supervisor Information		Employment Dates	
Employer Name		Name		From	
Address		Phone #		To	
City, State, Zip		Reason for Leaving			
Phone number		Position Duties			

**REFERENCES** (Give the names of three persons who have supervised you or who know about your work experience and are not related to you)

Name	Full Mailing Address	Position	Phone Number (with area code)	Work

**Are you aware of any reason (physically or mentally) you would not be able to perform the duties required of the position which you are making application?** (I have read the job description for the position for which I am applying and understand the conditions and performance requirements.) \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I am aware that it is my responsibility to have a teacher's certificate from the Colorado Department of Education to become a highly qualified teacher. It is the responsibility of the applicant to have all records, transcripts, certificates, license and other documentation completed to complete the hiring process, if offered a contract. Yes \_\_\_\_ No \_\_\_\_

**AGREEMENT**

I hereby certify that all statements made on this application are true, accurate, and complete. Any misrepresentation or willful omissions of facts shall be sufficient cause for disqualification of the application or termination of employment. I hereby authorize the district or its agents to conduct work history and personal reference checks to verify statements on this application form and other materials provided as part of my application for this position. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at anytime without any previous notice.

\_\_\_\_\_  
 Signature Date

- Please include the following:
- A complete application form.
  - A current professional resume
  - Three letters of reference which have been written within the past two (2) years.
  - Official Transcripts (copies will suffice for the application process)
  - Copy of Colorado Certification